MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

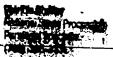
APPLICANT(S)

SERIAL NO.

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	CLAIMS	L	人名英格兰克		DEPT STATE		MATERIAL

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS



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HANNE